

# Crisis Hotline Selected Best Practices

Crisis Hotline Workgroup Presentation  
Behavioral Health Administration  
March 2017

# Sources – Best Practices

- Crisis Now: Transforming Services is Within our Reach
  - Crisis Services Task Force, National Action Alliance for Suicide Prevention
- National Suicide Prevention Lifeline standards and guidelines
- American Association of Suicidology accreditation standards

# Core Elements of Crisis Care

- Regional or statewide crisis call centers coordinating in real time
- Centrally deployed, 24/7 mobile crisis
- Short-term sub-acute residential crisis stabilization programs

# Essential Crisis Care Principles and Practices

- Recovery orientation
- Trauma-informed care
- Significant use of peer staff
- Commitment to Zero Suicide/Suicide Safer Care
- Strong commitment to safety of consumers and staff
- Collaboration with law enforcement

# Newer Elements

- Harnessing data and technology
- Power of peer staff
- “Living Room” model
- Mobile crisis teams go to where people are
- Evidence-based suicide prevention (local community based)

# Task Force Recommendations

- #1: Effective crisis care must be comprehensive and include the core elements.
- #2: Crisis call services should participate in and meet the standards of the National Suicide Prevention Lifeline, and crisis intervention systems should adopt and implement Zero Suicide/Suicide Safer Care across all program elements.

# Zero Suicide or Suicide Safer Care Elements

- Leadership driven, safety oriented culture committed to dramatically reducing suicide among people under care, which includes survivors of suicide attempts and suicide loss in leadership and planning roles
- Develop a competent, confident, and caring workforce

# Zero Suicide or Suicide Safer Care Elements

- Systematically identify and assess suicide risk among people receiving care
- Ensure every individual has a pathway to care that is both timely and adequate to meet his or her needs and that includes collaborative safety planning and reducing access to lethal means

# Zero Suicide or Suicide Safer Care Elements

- Use effective, evidence-based treatments that directly target suicidal thoughts and behaviors
- Provide continuous contact and support, especially after acute care
- Apply a data-driven quality improvement approach to inform system changes that will lead to improved patient outcomes and better care for those at risk

# Task Force Recommendation

- State and national authorities should review the core elements of Air Traffic Control qualified crisis systems, apply them to crisis care in their jurisdictions, and commit to achieving these capabilities within 5 years, so that each region of the US has a qualified hub for crisis care

# Air Traffic Control Objectives

- Always know where the individual in crisis is (in time and space) and never lose contact
- Verify the hand-off has occurred and the individual in crisis is safely in the hands of another provider

# Data and Technology

- ◉ Status Disposition for Intensive Referrals
- ◉ 24/7 Outpatient Scheduling
- ◉ Shared Bed Inventory Tracking
- ◉ High-tech GPS-enabled Mobile Crisis Dispatch
- ◉ Real-time Performance Outcome Dashboards

Preceding material is summarized  
from portions of ***Crisis Now:  
Transforming Services is Within Our  
Reach***

Crisis Services Task Force, National  
Action Alliance for Suicide Prevention